



# Spotlight on HIV/STD/Viral Hepatitis Indiana Semi-Annual Report

April 2021

## BULLETIN BOARD

### AT A GLANCE

(Semi-Annual & Cumulative HIV, AIDS, STD, and Hepatitis B & C Data)

- By Mode of Transmission
- By Age at Diagnosis
- By Race/Ethnicity
- By Gender

### PERINATAL HIV TRANSMISSION

### HIV DISEASE MAPS

- Deaths Reported by County
- Indiana Persons Living with HIV Disease by Last Known County of Residence

### SEXUALLY TRANSMITTED DISEASE (STD) MORBIDITY

- Indiana STDs by Gender, Race/Ethnicity & Age
- Indiana STD Counts and Rates by County

### HEPATITIS

- Hepatitis C
- Hepatitis B Semi-Annual & Cumulative Data

### SURVEILLANCE TRENDS

- HIV/AIDS Care Continuum
- HIV/AIDS Surveillance

## NOTE:

The subject heading 'HIV Disease' found within this document refers to a combined total of persons with HIV or AIDS.

The statistics reported in this document are compiled by the Office of Clinical Data and Research, the Sexually Transmitted Disease program, and the Viral Hepatitis Surveillance program.

Notice of the Spotlight HIV/STD Semi-Annual Report is available by email. Just call (800) 376-2501 to be added to the notification list.

The following are also available on the website at <http://www.in.gov/isdh/17397.htm>:

#### [Confidential Adult or Pediatric Case Report Forms:](#)

- [MS PowerPoint presentation of instructions](#) for new areas of forms
- [Links to laws and rules regarding HIV/AIDS reporting; Communicable Disease Rule](#)

#### [Counseling & Testing Sites](#)

#### [Care Coordination Sites](#)

#### [STD Clinics](#)

#### [Guidelines for the Management of Hepatitis C](#)



Indiana Department of Health  
Office of Clinical Data and Research  
2 North Meridian Street, 6-C  
Indianapolis, IN 46204  
(317) 233-7406

Eric J. Holcomb  
Governor

Kristina Box, MD, FACOG  
State Health Commissioner



Indiana  
Department  
of  
Health

In cooperation with and funded by:

Centers for Disease  
Control and Prevention

# BULLETIN BOARD

## Indiana HIV/STD Advisory Council

Indiana Department of Health  
(Held virtually from 12:00a.m. to 4:00 p.m., please check for email updates)

Dates:  
02/18/2021  
04/15/2021  
06/17/2021  
08/19/2021  
10/21/2021

For information, call Darin Foltz at (317) 233-7050 or e-mail  
[dfoltz@isdh.in.gov](mailto:dfoltz@isdh.in.gov)

### Community Co-Chairs:

John Nichols, HIV Prevention Director, at (317) 232-3082  
Mark Schwering, HIV Services Director, at (317) 233-7189  
Caitlin Conrad, STD Prevention Director, at (317) 234-2871  
Daniel Hillman, HIV Surveillance Director, at (317) 233-7506  
Deborah Nichols, Viral Hepatitis and Harm Reduction Program Director, at (317) 234-9627

## HIV Education, Training and Development

Indiana Department of Health *(For IDOH-funded HIV Programs ONLY)*

For information, call Jeremy Turner at (317) 233-9900 or e-mail  
[jturner3@isdh.in.gov](mailto:jturner3@isdh.in.gov)

TBA

Please check the IDOH website for training dates.

<http://www.in.gov/isdh/17397.htm>

TBA

## Indiana Department of Health HIV/STD Supporting Programs

Division of HIV/STD/Viral Hepatitis information . . . . .	(317) 233-7499
Division Director. . . . .	(317) 233-9900 Jeremy Turner
Deputy Director . . . . .	(317) 233-7867 Larry Stribling Jr.
IDOH Medical Services Program . . . . .	(866) 588-4948 toll free
Prevention/Education Program . . . . .	(317) 232-3082 John Nichols
HIV/AIDS Clinical Data and Research Program for case reporting . . . . .	(317) 233-7406 or (800) 376-2501 toll free
Recalcitrant (ARC) Program . . . . .	(317) 233-7211 Public Health Investigator
Viral Hepatitis Program. . . . .	(317) 233-7499 Division Main Line
HIV/STD Training and Development . . . . .	(317) 234-8649 Mary Roberts
Requests for HIV data . . . . .	(317) 233-7506 Daniel Hillman
Requests for STD data . . . . .	(317) 234-9707 Ariel Cheatham

## Centers for Disease Control and Prevention (CDC) National AIDS Hotline

### Hotline Telephone Numbers:

CDC-INFO 24 Hours/Day (Both English and Spanish) 1-800-CDC-INFO (800-232-4636)  
1-888-232-6348 TTY Service for the Deaf  
E-mail: [cdcinfo@cdc.gov](mailto:cdcinfo@cdc.gov)

## Other HIV/AIDS or STD-related programs

**HIV/AIDS Treatment Information Service (ATIS)** – Bilingual health information specialists are available to answer questions and provide information about federally approved treatment for HIV and AIDS. Call toll-free Monday-Friday, noon – 5:00 p.m. EST at 1-800-448-0440, TTY 1-888-480-3739 and international 1-301-519-0459, or e-mail [atis@hivatis.org](mailto:atis@hivatis.org). All calls and e-mails are confidential.

**American Red Cross Training** - This training prepares future instructors to build the skills and knowledge they need to educate our community to prevent HIV infection. Call (317) 684-4340.

**National Institutes of Health (NIH):** [www.nih.gov](http://www.nih.gov)

Education website: AIDSinfo “Live Help” <http://www.aidsinfo.nih.gov/> This site provides individual, confidential assistance to visitors experiencing difficulty navigating the AIDSinfo Web site and/or locating federally-approved HIV/AIDS information.

Centers for Disease Control and Prevention (CDC) website that provides information on the sexual health of men: [www.cdc.gov/men/index.htm](http://www.cdc.gov/men/index.htm)

**Midwest AIDS Training & Education Center (MATEC)**

For clinician consultations, call Malinda Boehler, Director, at (317) 630-7441 or email [mboehler@iupui.edu](mailto:mboehler@iupui.edu)  
Available Monday through Friday, 9 a.m. to 5 p.m. EST. Answers will be given within 24-48 hours.

**Community Advisory Group (CAG)**

Step-Up, Inc. Todd Lare, [tlare@stepupin.org](mailto:tlare@stepupin.org)

National HIV Telephone Consultation Service

**1-800-933-3413**

**National HIV/AIDS Telephone Consultation Service (Warmline)**

The **Warmline** provides expert clinical advice on HIV/AIDS management for health care providers, for those with limited access to expert consultation to those with complex antiretroviral resistance dilemmas. The Warmline is available Monday through Friday, 8 a.m. to 8 p.m. EST.

For more information about this consultation line, go to <http://nccc.ucsf.edu/clinician-consultation/hiv-aids-management/>

## IDOH HIV/AIDS-related websites

**Division of HIV/STD/Viral Hepatitis** website: <http://www.in.gov/isdh/17397.htm>

**Communicable Disease Reporting Rule** <https://www.in.gov/isdh/17764.htm>

The **Spotlight on HIV/STD/Viral Hepatitis Semi-Annual Report** is a publication of the Indiana Department of Health with funding assistance from the Centers for Disease Control and Prevention.

*Kristina Box, MD, FACOG*  
State Health Commissioner

*Pamela Pontones*  
Deputy Director/Commissioner

*Jeremy Turner*  
Director, Division of HIV/STD/Viral Hepatitis

*Larry Stribling Jr.*  
Deputy Director, Division of HIV/STD/Viral Hepatitis

*Daniel M. Hillman, M.P.H.*  
Epidemiologist, Surveillance Director

Contributors

*Caitlin Conrad, Deborah Nichols, Ariel Cheatham,  
Stephanie Lofton, Joshua Dowell, Hailey Sherwood,  
Michael Connor, Colleen O'Brien, Kelli Edwards, and  
Denice Trulley*

# AT A GLANCE

Semi-Annual HIV/AIDS, STD, and Hepatitis B & C Data;  
January 1, 2020 through December 31, 2020

Indiana HIV/AIDS Cases	HIV at First Diagnosis	AIDS at First Diagnosis	
New Reports for 12/31/2020*	369	79	
	Total Persons Living with HIV (without an AIDS diagnosis)	Total Persons Living with AIDS	
Prevalence as of 12/31/2020**	6,501	6,092	
Indiana STD Cases	Primary/Secondary Syphilis	Gonorrhea	Chlamydia
1/1/20 – 12/31/2020***	519	14,206	33,709
Indiana Hepatitis B & C Cases	Hepatitis B 1/01/19 – 12/31/19	Hepatitis C *** 1/01/19 – 12/31/19	
	170	6,445	

\* New Reports are broken into 2 categories: HIV at First Diagnosis represents all new reports as being diagnosed first with HIV; AIDS at First Diagnosis represents all new reports as being diagnosed first with AIDS.

\*\* Prevalence is the number of people who are 'Living' in Indiana with HIV/AIDS, including those diagnosed in other states but living in Indiana.

\*\*\* Suspected, probable, and confirmed cases based on case investigation submission.

**IC-16-41-6-1 - HIV testing** (revised July 1, 2012). Allows a physician or physician's authorized representative to test an individual for HIV if certain conditions are met unless the individual to be tested refuses the test. (Previous law prohibited a physician from performing the test without the oral or written consent of the individual.)

Requires a refusal by an individual to be documented in the individual's medical record. Requires the physician or authorized representative to: (1) discuss with the patient the availability of counseling concerning the test results; (2) notify the patient of the test results; and (3) inform a patient with a positive HIV test result of treatment and referral options available. Provides that under certain circumstances, a physician may order an HIV test for a patient without informing the patient or despite the individual's refusal of the test.

## Perinatal Exposure Case Report Form for Babies Born to HIV Positive Mothers

(See the Perinatal HIV Transmission section of this report for further details.)

The reporting of each HIV/AIDS case is required by Indiana law (IC 16-41-2-1). Patients who are diagnosed in another state and are residing in Indiana must also be reported in Indiana. All infants born to an HIV+ mother must be reported, even though their final HIV status is not known until later. It is also important to remember that when a patient progresses from HIV infection stage to a diagnosis of AIDS, this must be reported separately. As a result of the progression to AIDS, these individuals are no longer considered to be HIV cases but are now considered to be AIDS cases. To help more accurately define the impact of HIV and AIDS on Indiana, deaths of those with HIV should also be reported. For assistance, questions, or case report forms and information, please call 1-800-376-2501.

## Technical Notes

Some adolescent AIDS cases have pediatric risk factors because they were less than 13 years old when infected. The Centers for Disease Control and Prevention Annual HIV/AIDS Surveillance Report can be found at: <https://www.cdc.gov/hiv/statistics/overview/index.html>

**Newly Reported Indiana HIV Cases and AIDS Cases by Mode of Transmission, Reported January 1, 2020 – December 31, 2020**

Mode of Transmission (Risk Factors)	HIV at First Diagnosis		AIDS at First Diagnosis	
	Count	%	Count	%
Men who have sex with men (MSM)	126	39%	30	31%
Persons who Inject Drugs (PWID)	12	3%	2	6%
MSM & PWID	6	4%	0	3%
Heterosexual	59	22%	10	26%
Mother diagnosed HIV+ or AIDS	1	0%	0	0%
PWID/Hetero	7	2%	4	1%
Other (Pediatric Transfusion, MSM Heterosexual and Adult Transfusion/Hemophilia etc.)	23	10%	10	7%
Not Identified at This Time and/or No Reported Risk	135	20%	23	26%
<b>Total</b>	<b>369</b>	<b>100%</b>	<b>79</b>	<b>100%</b>

**Newly Reported Indiana HIV Cases and AIDS Cases by Age at Diagnosis, Reported January 1, 2020 – December 31, 2020**

Age at Diagnosis	HIV at First Diagnosis		AIDS at First Diagnosis	
	Count	%	Count	%
<5	0	0%	0	0%
5-12	1	0%	0	0%
13-19	17	6%	1	1%
20-29	147	37%	18	16%
30-39	98	31%	18	36%
40-49	57	15%	16	29%
50+	49	11%	26	18%
Unknown	0	0%	0	0%
<b>Total</b>	<b>369</b>	<b>100%</b>	<b>79</b>	<b>100%</b>

**Newly Reported Indiana HIV Cases and AIDS Cases by Race/Ethnicity and Gender, Reported January 1, 2020 – December 31, 2020**

Race/Ethnicity	HIV at First Diagnosis				AIDS at First Diagnosis			
	Male	%	Female	%	Male	%	Female	%
White	123	42%	28	36%	37	54%	4	40%
Black	123	42%	41	53%	20	29%	5	50%
Hispanic, all races	34	12%	6	8%	11	16%	1	10%
Other	12	4%	2	3%	1	1%	0	0%
<b>Total</b>	<b>292</b>	<b>100%</b>	<b>77</b>	<b>100%</b>	<b>69</b>	<b>100%</b>	<b>10</b>	<b>100%</b>
<b>Gender</b>	<b>79%</b>		<b>21%</b>		<b>87%</b>		<b>13%</b>	

# PERINATAL HIV TRANSMISSION

Children Born to HIV Infected Mothers who are current residents of Indiana,  
Cumulative 1982 through December 31, 2020

Race	2020 Exposures	2020 Exposures now with HIV Disease	Total Exposures	Child Exposures now with HIV Disease
White	10	0	348	31
Black	17	1	684	87
Hispanic – All Races	0	0	128	12
Multiracial – Non Hispanic	0	0	0	0
Other	5	0	122	22
Total	32	1	1,282	152

**Exposure** = Children born to HIV+ women. Laboratory testing has not yet determined their HIV status.

**HIV Disease** = Children born to HIV+ women. Laboratory testing has confirmed that the child is HIV+.

**NOTE:** Counts include foreign-born adoptees or children diagnosed in another state who currently reside in Indiana.

**Special Note:** The 1 listed Pediatric case was a refugee that moved to Indiana in 2020.

## \*New Perinatal Exposure Case Report Form for Babies Born to HIV Positive Mothers\*

Babies born to HIV-positive mothers must be reported by law (IC 16-41-2-1) to the Indiana Department of Health (IDOH) within 72 hours following birth. The current Pediatric Case Report form was to be completed for all Perinatal Exposures, Pediatric Seroreverters and/or Pediatric HIV/AIDS cases. A simpler form was requested by a number of providers and in response, the new Perinatal Exposure Case Report form was developed. It is important to note that this new Perinatal Exposure Case Report form does not take the place of the Pediatric Case Report entirely. However, this new form is shorter and more user-friendly when informing IDOH of perinatal exposures that will require further follow-up at a later time. This new form can be accessed at:

<http://www.in.gov/isdh/17764.htm>

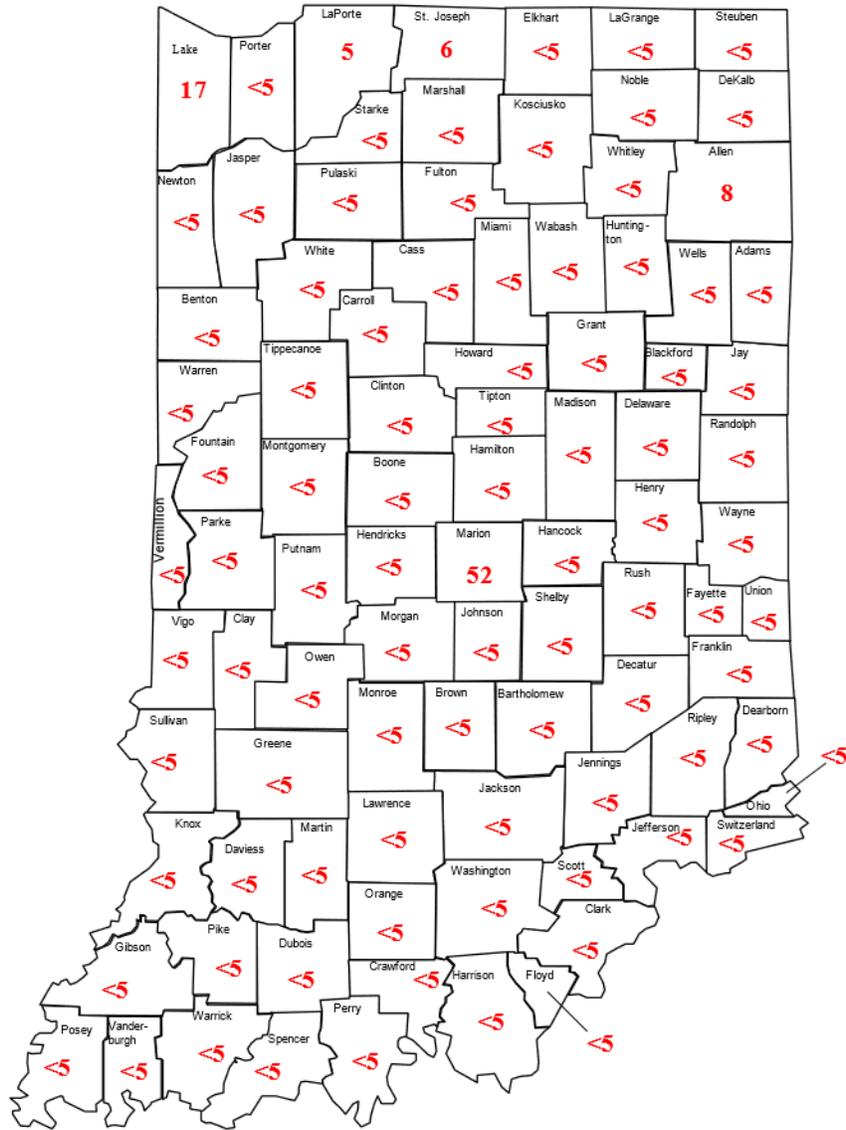
For questions with regards to the use of this form or any other HIV case report forms please contact:

**Office of Clinical Data and Research, 800-376-2501.**

# HIV DISEASE CASE DEATHS REPORTED IN 2020\*

Total Deaths among Persons with HIV Disease Reported Since 1981: 7,520

**NOTE:** A Vital Records and National Death match was performed, which resulted in unreported deaths from previous years.



\* The subject heading 'HIV Disease' found within this document refers to a combined total of persons with HIV or AIDS including those where progression to AIDS has occurred.

Note: Data are suppressed when counts are <5 or if determined identifiable.

# Indiana Persons Living with HIV Disease as of December 31, 2020

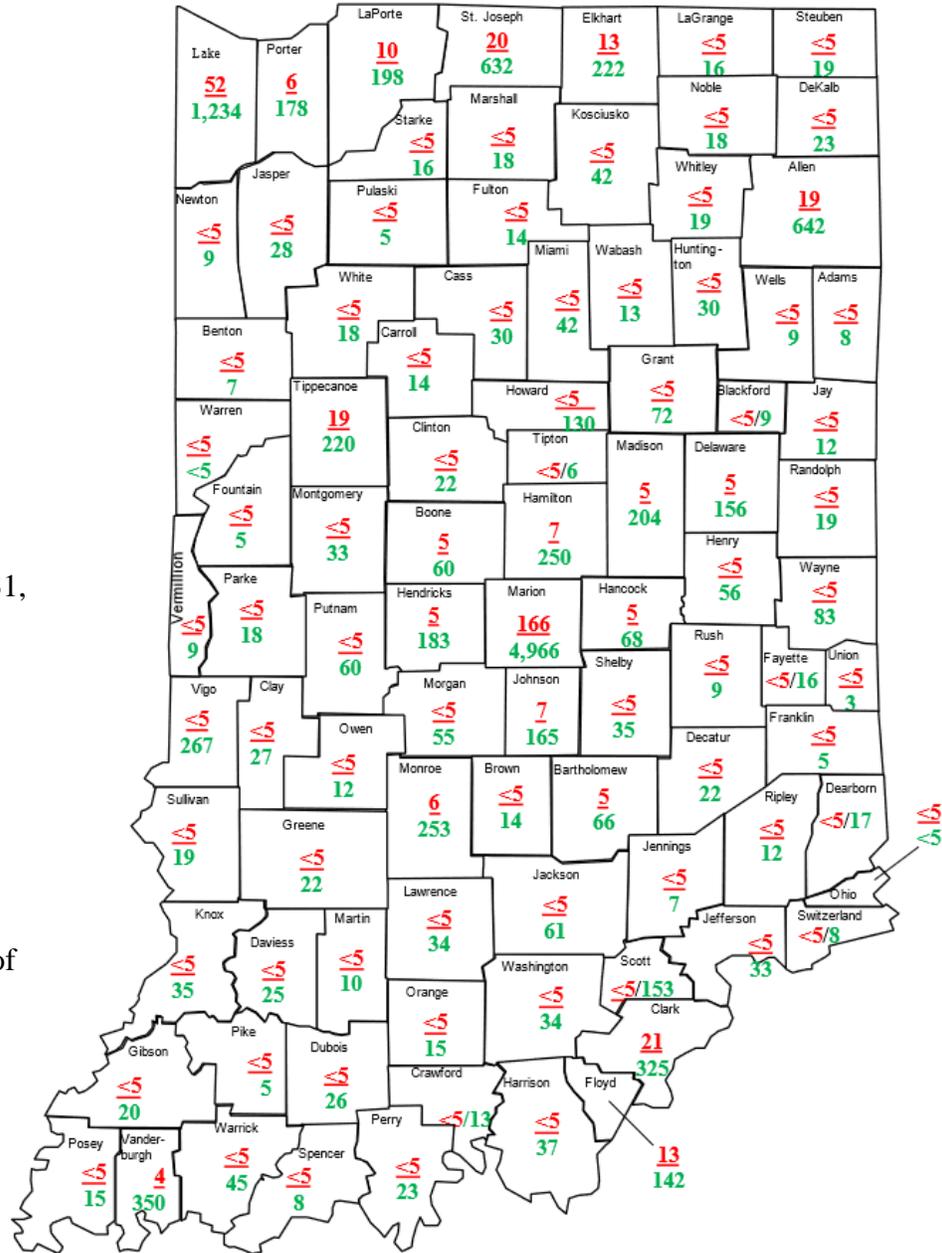
**Top Number:**

New HIV/AIDS Reports

January 1, 2020 – December 31, 2020

**Bottom Number:**

Total Persons Living with HIV/AIDS, including cases diagnosed in other states and currently living in Indiana as of December 31, 2020



\* The subject heading 'HIV Disease' found within this document refers to a combined total of persons with HIV or AIDS, including those where progression to AIDS has occurred.

Note: Data are suppressed when counts are <5 or if determined identifiable.

# STD MORBIDITY

## Chlamydia, Gonorrhea and Syphilis Morbidity – January – December 2020

Gender	Chlamydia		Gonorrhea		Syphilis (Primary and Secondary)	
Female	22,907	68.0%	7,034	49.5%	88	17.0%
Male	10,772	32.0%	7,159	50.4%	431	83.0%
Unknown	30	<1%	13	<1%	0	0.0%
Total	33,709	100.0%	14,206	100.0%	519	100.0%
Race	Chlamydia		Gonorrhea		Syphilis (Primary and Secondary)	
White	13,342	39.6%	5,117	36.0%	226	43.5%
Black	10,272	30.5%	6,404	45.1%	233	44.9%
All Others	2,821	8.4%	950	6.7%	57	11.0%
Unknown	7,274	21.6%	1,735	12.2%	3	<1%
Total	33,709	100.0%	14,206	100.0%	519	100.0%
Ethnicity	Chlamydia		Gonorrhea		Syphilis (Primary and Secondary)	
Hispanic	2,187	6.5%	690	4.9%	49	9.4%
Non-Hispanic	21,980	65.2%	11,030	77.6%	458	88.2%
Unknown	9,542	28.3%	2,486	17.5%	12	2.3%
Total	33,709	100.0%	14,206	100.0%	519	100.0%
Age	Chlamydia		Gonorrhea		Syphilis (Primary and Secondary)	
0-19	9,618	28.5%	2,639	18.6%	21	4.0%
20-24	12,692	37.7%	4,244	29.9%	96	18.5%
25-29	6,032	17.9%	3,023	21.3%	112	21.6%
30-34	2,676	7.9%	1,836	12.9%	92	17.7%
35-39	1,352	4.0%	1,047	7.4%	56	10.8%
40-44	693	2.1%	634	4.5%	44	8.5%
45-54	506	1.5%	546	3.8%	59	11.4%
55+	130	<1%	235	1.7%	39	7.5%
Unknown	10	<1%	2	<1%	0	0%
Total	33,709	100%	14,206	100.1%	519	100%

Source: IDOH STD Database as of March 22, 2021

NOTE: Not all percentages may add to 100 due to rounding.

# Indiana STD Counts and Rates by County

Indiana STD Counts and Rates January - December 31, 2020

No cell less than 5 is shown in order to protect confidentiality Last Known County of Residence	Chlamydia		Gonorrhea		Syphilis	
	Count	Rate	Count	Rate	Count	Rate
Adams	97	271.1	20	55.9	0	0
Allen	2,500	659.1	1,032	272.1	17	4.5
Bartholomew	276	329.4	104	124.1	<5	S
Benton	24	274.3	8	91.4	0	0
Blackford	37	314.7	16	136.1	0	0
Boone	154	227.0	30	44.2	<5	S
Brown	16	106.0	7	46.4	0	0
Carroll	49	241.9	16	79.0	0	0
Cass	144	382.1	48	127.4	<5	S
Clark	512	432.8	225	190.2	19	16.1
Clay	98	373.7	22	83.9	0	0
Clinton	133	410.5	44	135.8	<5	S
Crawford	31	293.1	9	85.1	0	0
Daviess	103	308.8	26	78.0	<5	S
Dearborn	83	167.8	16	32.4	0	0
Decatur	77	289.9	26	97.9	0	0
Dekalb	140	322.0	46	105.8	<5	S
Delaware	770	674.6	261	228.7	6	5.3
Dubois	134	313.6	28	65.5	0	0
Elkhart	972	471.1	411	199.2	10	4.8
Fayette	60	259.7	23	99.6	0	0
Floyd	230	254.6	56	62.0	0	0

No cell less than 5 is shown in order to protect confidentiality Last Known County of Residence	Chlamydia		Gonorrhea		Syphilis	
	Count	Rate	Count	Rate	Count	Rate
Fountain	280	356.6	125	159.2	11	14.0
Franklin	52	318.1	7	42.8	<5	S
Fulton	23	101.1	12	52.7	0	0
Gibson	47	235.3	13	65.1	0	0
Grant	105	312.0	27	80.2	<5	S
Greene	406	617.3	171	260.0	<5	S
Hamilton	92	288.2	26	81.4	0	0
Hancock	513	151.8	138	40.8	5	1.5
Harrison	207	264.8	48	61.4	<5	S
Hendricks	86	212.3	30	74.0	0	0
Henry	484	284.2	148	86.9	<5	S
Howard	106	221.0	37	77.1	0	0
Huntington	380	460.4	165	199.9	8	9.7
Jackson	109	298.5	37	101.3	0	0
Jasper	126	284.9	31	70.1	0	0
Jay	85	253.3	15	44.7	0	0
Jefferson	83	406.1	30	146.8	0	0
Jennings	102	315.7	42	130.0	<5	S
Johnson	64	230.8	20	72.1	0	0
Knox	521	329.4	159	100.5	6	3.8
Kosciusko	117	319.7	39	106.6	0	0
LaGrange	246	309.6	56	70.5	<5	S
Lake	40	101.0	16	40.4	0	0

No cell less than 5 is shown in order to protect confidentiality Last Known County of Residence	Chlamydia		Gonorrhea		Syphilis	
	Count	Rate	Count	Rate	Count	Rate
LaPorte	2,859	588.9	1328	273.5	41	8.4
Lawrence	502	456.8	226	205.7	5	4.6
Madison	104	229.2	32	70.5	0	0
Marion	709	547.2	329	253.9	11	8.5
Marshall	10,035	1,040.3	4,789	496.5	260	27.0
Martin	98	211.9	32	69.2	<5	S
Miami	18	175.5	<5	S	0	0
Monroe	108	304.1	32	90.1	0	0
Montgomery	773	520.8	288	194.0	7	4.7
Morgan	132	344.3	45	117.4	<5	S
Newton	196	278.1	55	78.0	<5	S
Noble	21	150.2	<5	S	0	0
Ohio	158	330.9	52	108.9	0	0
Orange	6	102.1	<5	S	0	0
Owen	66	335.9	6	30.5	0	0
Parke	63	302.9	18	86.5	0	0
Perry	56	330.6	20	118.1	<5	S
Pike	34	177.4	12	62.6	0	0
Porter	27	217.9	6	48.4	0	0
Posey	418	245.3	105	61.6	<5	S
Pulaski	48	188.8	23	90.5	0	0
Putnam	35	283.3	5	40.5	<5	S
Randolph	107	284.8	25	66.5	<5	S

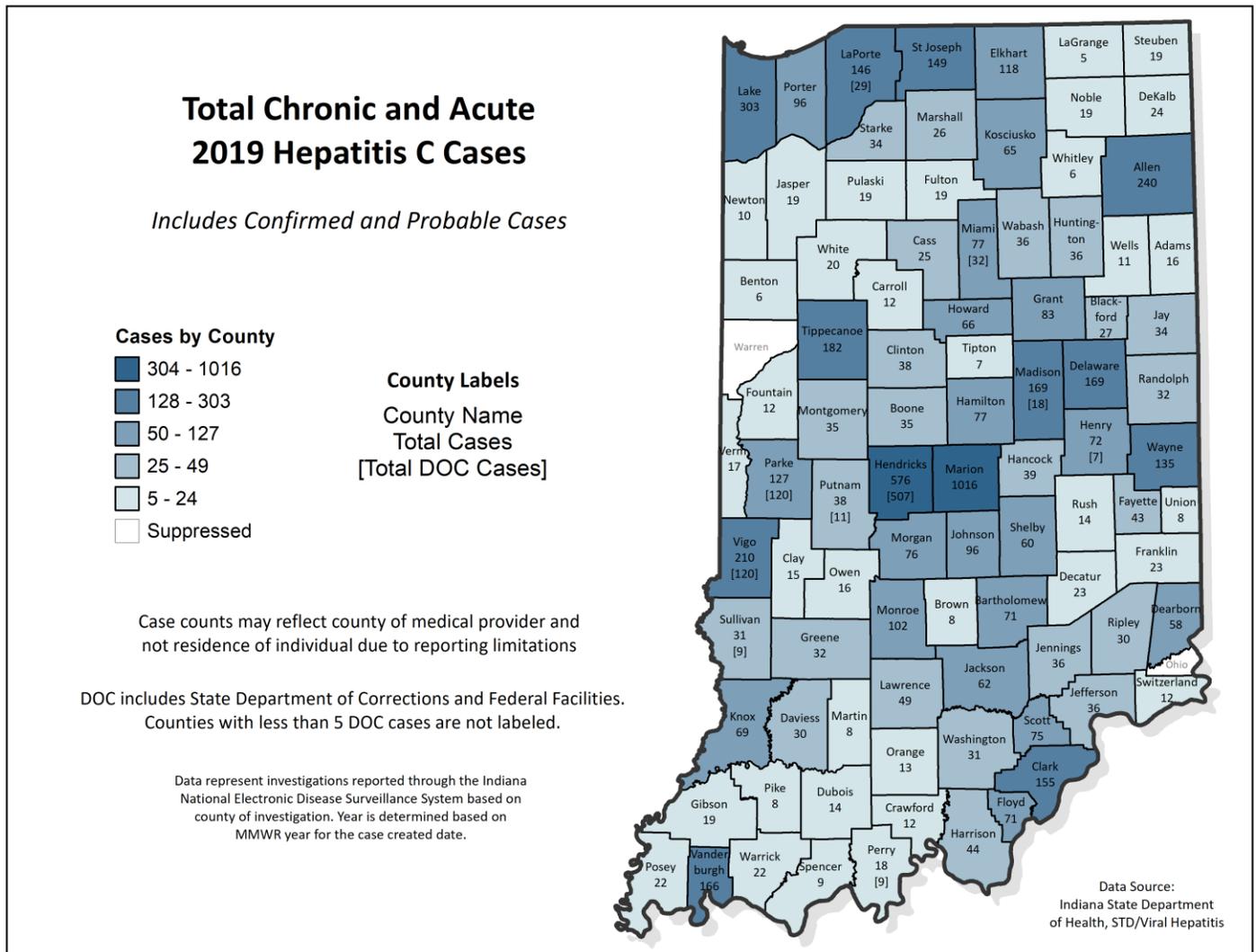
No cell less than 5 is shown in order to protect confidentiality Last Known County of Residence	Chlamydia		Gonorrhea		Syphilis	
	Count	Rate	Count	Rate	Count	Rate
Ripley	72	291.9	23	93.2	<5	S
Rush	43	176.5	13	45.9	0	0
Scott	50	301.5	15	90.5	0	0
Shelby	69	289.0	22	92.2	<5	S
Spencer	136	304.1	34	76.0	<5	S
St Joseph	41	202.2	16	78.9	0	0
Starke	1,775	653.0	1,004	369.4	15	5.5
Steuben	42	182.6	9	39.1	<5	S
Sullivan	89	257.3	41	118.5	0	0
Switzerland	47	227.4	14	67.7	0	0
Tippecanoe	19	176.7	<5	S	0	0
Tipton	1,011	516.5	360	183.9	24	12.3
Union	27	178.2	6	39.6	0	0
Vanderburgh	7	99.2	<5	S	0	0
Vermillion	1,243	685.0	678	373.7	13	7.2
Vigo	58	374.2	9	58.1	0	0
Wabash	644	601.7	350	327.0	8	7.5
Warren	88	283.9	21	67.8	<5	S
Warrick	21	254.0	<5	S	0	0
Washington	162	257.2	66	104.8	<5	S
Wayne	54	192.6	19	67.8	0	0
Wells	285	432.6	137	207.9	9	13.7
White	81	286.3	18	63.6	0	0

No cell less than 5 is shown in order to protect confidentiality Last Known County of Residence	Chlamydia		Gonorrhea		Syphilis	
	Count	Rate	Count	Rate	Count	Rate
Whitley	79	327.8	20	83.0	0	0
Unknown	79	232.6	25	73.6	0	0
<b>Total</b>	<b>33,709</b>	<b>500.7</b>	<b>14,206</b>	<b>211.0</b>	<b>519</b>	<b>7.7</b>

Note: Data are suppressed(s) when counts are <5 or if determined identifiable

# HEPATITIS C

January 1, 2019– December 31, 2019



# HEPATITIS B

## Acute Hepatitis B January - December 31, 2019

AGE_RANGE	Acute
01-04	0
05-09	0
10-19	<5
20-29	16
30-39	61
40-49	51
50-59	27
60-69	11
70-79	<5
80-89	<5
<b>Total</b>	<b>170</b>

RACE	Acute
White	128
Other/Multiracial	19
Asian	<5
Unknown	5
Native Hawaiian or Other Pacific Islander	<5
Black or African American	15
<b>Total</b>	<b>170</b>

SEX	Acute
Male	105
Female	65
Unknown	0
<b>Total</b>	<b>170</b>

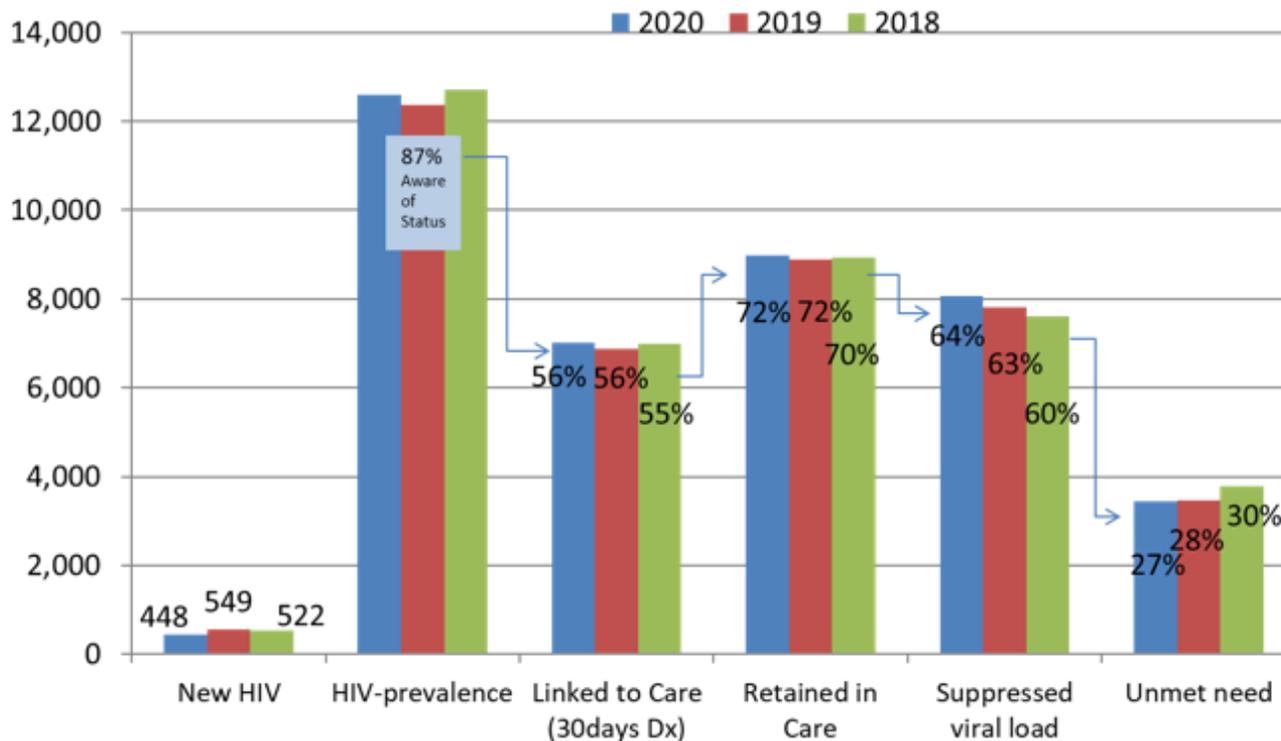
**Note:** data from 2019 are preliminary and subject to change.

**Technical Notes:** Reported cases of acute hepatitis B must meet the following clinical and laboratory criteria:

**Clinical:** An acute illness with a) discrete onset of symptoms and b) jaundice or elevated serum aminotransferase levels.

**Laboratory:** IgM antibody to hepatitis B core antigen (anti-HBc) positive or hepatitis B surface antigen (HbsAg) positive. IgM antibody to hepatitis A (anti-HAV) negative (if done).

# The Continuum of HIV Care, Indiana, Years 2018-2020



- HIV-prevalence represents those aware of their HIV status (87%)
- Of those aware of their HIV status, 70% (2018) vs 72% (2020) are retained in care (past 12mths)
- Of those aware of their HIV status, 60% (2018) vs 64% (2020) have a suppressed VL
- CDC. Prevalence of Diagnosed and Undiagnosed HIV Infection — United States, 2008–2012.

Indiana Department of Health,  
HIV/STD/Viral Hepatitis

# Indiana HIV/AIDS Surveillance

**Table1. Newly Reported Indiana HIV and AIDS Cases, Reported 2007-2020**

Year	HIV		AIDS		HIV/AIDS
	Count	%	Count	%	Total
2007	418	78%	115	22%	533
2008	329	70%	141	30%	470
2009	371	73%	138	27%	509
2010	370	75%	123	25%	493
2011	372	74%	129	26%	501
2012	405	80%	104	20%	509
2013	364	80%	90	20%	454
2014	421	82%	94	18%	515
2015*	543	87%	78	13%	621
2016	413	78%	94	22%	507
2017	444	81%	103	19%	547
2018	419	80%	103	20%	522
2019	455	83%	94	17%	549
2020	369	82%	79	18%	448
<b>Avg.</b>	407		106		513
<b>Std. Dev.</b>	53		20		44
<b>Range</b>	(354-460)		(86-126)		(469-557)

**\*Significant Differences**

**Figure1. Newly Reported Indiana HIV and AIDS Cases, Reported 2007-2020**

